

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/2023

Speaker's Name:

BRUCE FRANCIS

Representing

(Print clearly)

Speaker's Address:

1601 SARAH ST

(Print complete address)

LAKE WALES, FL 33898

City

State

Zip Code

Telephone No:

407-432-0742

Email:

bfrancis100@gmail.com

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☐

I wish to speak during these Agenda Item(s) (Identify Item number(s)):

6

☐

I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items)

☐

For or Against (Circle One), Comments:

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/23

Speaker's Name:

Mary Beth Salisbury

Representing

(Print clearly)

Speaker's Address:

3613 Ridge Lake Dr

(Print complete address)

LAKE WALES

FL

33898

City

State

Zip Code

Telephone No:

407-873-4002

Email:

MaryBethSalisbury1@gmail.com

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I wish to speak during these Agenda Item(s) (Identify Item number(s)):

6

☐

I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items)

☐

For or Against (Circle One), Comments:

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/2023

Speaker's Name:

JAMES SALISBURY

(Print clearly)

Representing

MYSELF

Speaker's Address:

1640 HIGH LAGO PARK DR. S.

(Print complete address)

LAKE WALES

City

FL.

State

33898

Zip Code

Telephone No:

407-873-1400

Email:

jamespsalisbury@gmail.com

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I wish to speak during these Agenda Item(s) (Identify Item number(s)):

(8-11) (8-111) 6



I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____



For or Against (Circle One), Comments:

WOULD LIKE MORE INFORMATION.

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/2023

Speaker's Name:

Cassandra Richards

(Print clearly)

Representing

Highland Manor

Speaker's Address:

2357 Friedlander Rd.

(Print complete address)

LAKE WALES

City

FL

State

33898

Zip Code

Telephone No:

Email:

rich26230K@yahoo.com

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I wish to speak during these Agenda Item(s) (Identify Item number(s)):

Comments & Petition



I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____



For or Against (Circle One), Comments:

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/23

Speaker's Name:

Allen Tatem

Representing _____

(Print clearly)

Speaker's Address:

778 Chelisa Way
(Print complete address)

Lake Wales

FL

33853

City

State

Zip Code

Telephone No:

669-5731

Email:

allen@nativimageryfl.com

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☒

I wish to speak during these Agenda Item(s) (Identify Item number(s)): Comments & Petitions

☐

I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____

☐

For or Against (Circle One), Comments: _____

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2-21-23

Speaker's Name:

Becky Wynkoop

Representing _____

(Print clearly)

Speaker's Address:

413 E. Seminole Av.

(Print complete address)

Lake Wales

FL

33853

City

State

Zip Code

Telephone No:

289 5030

Email:

becky.wynkoop@comcast.net

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I wish to speak during these Agenda Item(s) (Identify Item number(s)): Comments

☐

I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____

☐

For or Against (Circle One), Comments: _____

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/21/23

Speaker's Name:

Catherine Price

(Print clearly)

Representing

self

Speaker's Address:

813 Campbell Ave.

(Print complete address)

Lake Wales

FL

33853

City

State

Zip Code

Telephone No:

(0)

Email:

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I wish to speak during these Agenda Item(s) (Identify Item number(s)): Comments + Petitions



I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____



For or Against (Circle One), Comments: _____

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2/20/23

Speaker's Name:

Juanita Zwaryczuk

(Print clearly)

Representing

resident

Speaker's Address:

348 E. Tillman Ave.

(Print complete address)

Lake Wales

FL

33853

City

State

Zip Code

Telephone No:

631-317-0159

Email:

namastejfz@gmail.com

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I wish to speak during these Agenda Item(s) (Identify Item number(s)): 6 (Comments + Petitions)



I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items) _____



For or Against (Circle One), Comments: _____

City of Lake Wales, Florida

CITY COMMISSION - REQUEST TO SPEAK

The time limit is five minutes.



Date:

2-21-23

Speaker's Name:

Charlene Bennett

Representing

(Print clearly)

Speaker's Address:

929 Carlton Ave

(Print complete address)

Lake Wales

FL

33853

City

State

Zip Code

Telephone No:

863 978 3484

Email:

charleneben@earthlink.net

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I wish to speak during these Agenda Item(s) (Identify Item number(s)):

6 Comments & Petitions



I waive my right to speak, but wish to express my opinion regarding Agenda items (Identify Items)



For or Against (Circle One), Comments: